



**Building Inspection Department**  
 100 North Court Street  
 Georgetown, KY 40324  
 Phone: (502) 863-9802 Fax: (502) 863-4169

**Permit Application Form**

**Permit Number**

☐ City ☐ County

## Manufacture Housing Building Permit Application

<b>Construction Location</b>				<b>Zoning</b>			
<b>Applicant</b>				<b>Contact Name</b>			
<b>Address</b>				<b>Contact Phone Numbers</b>			
<b>Subdivision</b>				<b>Lot Size</b>			
				<b>Lot #</b>			
				<b>Unit #</b>			
<input type="checkbox"/> <b>Modular Home</b> Year _____ Brand Name _____ • Attach <u>K.I.B.s</u> letter from the state to this application • Type of Foundation <input type="checkbox"/> Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab • Attach Foundation sectional drawing indicating dimensions and materials. Note: The applicant is responsible for scheduling foundation inspections with this office.							
<input type="checkbox"/> <b>Mobile Home</b> Year _____ Brand Name _____ • B1 Seal Number _____ Note: Please schedule a final inspection to verify that the mobile home has been placed on the Property according to the submitted site plan.							
<b>MODULAR / MOBILE HOUSE INFORMATION</b>							
<b>How many Bedrooms?</b>				<b>Bathrooms?</b>			
<b>Number of Floors?</b>							
<b>Structure:</b>	<b>Width</b>		<b>Length</b>		<b>Height</b>		<b>Total Square Footage</b>
<b>Exterior Finish</b>		<input type="checkbox"/> Brick <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> Other _____					
<b>Sewage Disposal System</b>		<input type="checkbox"/> Sewer <input type="checkbox"/> Septic * (Site Evaluation is Required)					
<b>Cost of Construction for this project ( not including lot or land)</b>						\$ _____	
<b>DECK / PORCH INFORMATION</b>							
<b>Will a Deck be built?</b>		<input type="checkbox"/> No <input type="checkbox"/> Yes -- Fill out below					
<b>Deck size:</b>	<b>Width</b>		<b>Length</b>		<b>Height</b>		<b>Total Square Footage</b>

**Notes:**

- **Attach Sketch of DECK indicating size and spacing of lumber.**
- **Decks must be inspected and approved by this office.**
- **A site plan must be submitted with this application.**
- **A copy of the sewage site evaluation must be included if this structure is not connected to a sewage treatment system.**

The undersigned hereby certifies they are the owner or the owner's agent of the property and that all information is true and accurate to the best of their knowledge.

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

### OFFICE USE ONLY

<b>Modular</b>	x .12 per sq. ft. =		<b>Mobile</b>	\$ 100	
<b>+</b>	<b>Deck Fee:</b>	\$ 40	<b>+</b>	<b>(For City Residents only)</b>	
			<b>Erosion Control Fee</b>	\$25	<b>Garbage Container Fee</b>
			\$ 60		
<b>TOTAL PERMIT FEE:</b>			\$	<b>Remarks</b>	
<b>Receipt #</b>		<b>Date Received</b>	/ /	<b>Check #</b>	
			<b>Received By</b>		



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**AFFIDAVIT OF ASSURANCES\***  
**PURSUANT TO KRS 198B.060 (10)**

Comes the Applicant; \_\_\_\_\_, and states, pursuant to KRS 198B.060 (10), that all contractors and subcontractors employed or that will be employed on any activity under the above referenced project shall be in compliance with the Commonwealth of Kentucky requirements for Worker's Compensation Insurance (according to KRS Chapter 342) and Unemployment Insurance (according to KRS Chapter 341).

THIS the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Contractor, Owner or Owner's Agent

SUBSCRIBED AND SWORN to before me by \_\_\_\_\_

Applicant, on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public  
State At Large

My commission Expires: \_\_\_\_\_

\* ( ) The Affidavit of Assurances is not required if the local building code official was presented the assurances upon issuance of the local building permit.

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- ☐ **Soil Erosion** – I am aware of and will comply with City of Georgetown Ordinance # 2010-014 Erosion Prevention and Sediment Control Requirements.
- ☐ **Inspections** – I am aware of the required inspections and the applicant's responsibility to schedule those inspections.

\_\_\_\_\_  
Signature of Applicant